Clinton

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE/A 57,

FOR INSTRUCTIONS, SEE BACK OF FORM			FORM	
DISCLOSURE SUMMARY PAG	GE/A cr.		DR-2	DISCLOSURE
	· · · · · · · · · · · · · · · · · · ·	(F	Rev. 12/2005)	REPORT
2003	Pin	-	or Office Hee Or	
CITIZENS FOR HOLM	JAN 16 AM 9: 10	C	or Office Use On omm. #	/3361
				<u>-</u>
(1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Candi	2)State PAC (3)State Party	1 1		
Political Subdivision Candidate (8) County PAC (9) City PAC (10	School Board or Other Political	C	canned	n
Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTES ONLY:				
Candidate Name RODGER E.J. HOLM	Political Party (if applicable)	-		
	Foliucal Farty (II applicable)		File with: owa Ethics and	Ca
Office Sought	District (CO control 14		Owa Emics and Disclosure Board	
MAYOR, CITY OF CLINTON	District (if Senate or House)	1 1	510 E. 12 th , Ste.	
			Des Moines, Iow Fax: 515-281-37	
Late reports are subject to possible civil and criminal penalties. Pursi the candidate, for a candidate's committee, and the chairperson, for	uant to lowa Code section 68B.3	2A(7)		
individual responsible for filing timely and accurate reports.	any valor type of committee, is a	ie .		
Charley a. Sheridan	563/243-029	3	3 A NI I A	DV 10 0000
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	<u> </u>	DATE SIG	RY 12, 2008
IAM FILING A DECEMBER 31, 2007	_ REPORT FOR (1) ELECTION /(2	NONEI FO	TION VEAD	
(report date)	Indicate by		MON ILAN.	
CHECK IF AMENDMENT TO REPORT DATED	marcate by			·
		t	mittees, enter Da	
Check if this is final (termination) report and attach Notice of Disso	lution Form DR-3.		BER 6, 200	
(You must continue to file reports until a DR-3 is filed.)		Which Elect		, enter County in
		CLINTO	N COUNTY	
STATEMENT	OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total of all	funds held by the			
committee. This amount MUST be the same as the cash on of the last reporting period or must be zero if this is first rep	hand at the end	•	2,528.9	0
ADD TOTAL MONEY TAKEN IN THIS PERIOD	ort med.)		2,020.9	0
Schedule A: Cash Contributions total (Attach Schedule A)	(tales as in hind but)		227.0	n
Schedule F: Loans Received total (Attach Schedule F)			-0-	· · · · · · · · · · · · · · · · · · ·
Schedule H: Total Sales of Campaign Property (Attach Sche		•••••		· · · · · · · · · · · · · · · · · · ·
(Schedule H applies to Candidates' Committee				
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL	. -	2,755.9	8
			2 102 0	0
Schedule B: Expenditures total (Attach Schedule B) (**also			2,103.0	<u> </u>
Schedule F: Loan Repayments total (Attach Schedule F)		•••••	0_	
CASH ON HAND at the end of this reporting period (if final report balan be zero) (Attach DR-3)	nce must	•	652.9	Ω
be zero) (Attach DR-3)			032.9	0
**UNPAID BILLS(From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			0-	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$	1,800.0	0
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES X NO	
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedu	ule H)	\$	-0-	
			•	

For Instructions, See Back of Form

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	<u> </u>
COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS BOX IF AMENDING FORM
CITIZENS FOR HOLM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
10-26-07	NUMBER ID# CK#	RANDALL VENS 370 33RD AVE N		\$ 100.00	INCOME
10-30-07	ID#	CLINTON IA 52732 HENRY/MARLENE LUCKRITZ	SISTER &	100.00	
10-30-07	CK#	3708 N 3RD ST CLINTON IA 52732	BROTHER-IN- LAW	100.00	
11-16-07	ID#	MARIAN L. ENWRIGHT 726 S 32ND ST CLINTON IA 52732		25.00	
11-16-02	ID# CK#	POSTMASTER (REFUND ON MAILBOX 300 S 1ST CLINTON IA 52732	KEYS)	2.00	
	ID#	02711011 171 02702			
	CK#				
	ID#				
	CK#				
	ID#				
	CK#	·			
	ID#				
	CK#				
	ID#				
	CK#				
 	ID#				
	CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

(for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

•	_			-	_	
•		201		5 6		
D.		27.0			5.50	
		SO.	17.5		440.00	
11			100		5. "	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR HOLM

· DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-08-07	ID# CK#	CLINTON HERALD 221 6TH AVE S CLINTON IA 52832	POLITICAL ADS ON 10-31, 11-3 & 11-5	\$ 1,037.85
11-08-07	ID# CK#	RASTRELLI'S 238 MAIN AVE CLINTON IA 52732	VICTORY CELEBRATION FOR SUPPORTERS	394.37
11-08-07	ID# CK#	CLINTON PRINTING 1406 ROOSEVELT CLINTON IA 52732	PRINTING OF BROCHURES & NOTE PADS	406.60
12-05-07	ID#	CLINTON HERALD	THANK YOU AD	264.18
	ID#	ř		
	ID# CK#			
710.5	ID# CK#			
	ID# CK#			
			SUB-TOTAL	¢

Г	HIS	RO	λC	APPI	IFS TO	CAN	DIDAT	resi c	OMMITTEES	ONLY-

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 1 of 1	
-------------	--

TOTAL (if last page of this schedule)

\$2,103.00

FORM
OFFO
BACK
SEE 1
٠.٠
ICTIONS
2 11
FOR

COMMITTEE NAME(Must be same as on Statement of Organization)

CITIZENS FOR HOLM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$~1,800.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

	 ₩		
DAT (MM	AMOUNT OF LOAN	RELATIONSHIP TO CANDIDATE (If Applicable*)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

CHECK THIS BOX IF AMENDING FORM

LOANS RECEIVED & REPAID

(Rev. 07/03)

SCHEDULE

		 		-
AMOUNT REPAID	\$			-0-
RELATIONSHIP TO CANDIDATE* (If Applicable)				* *
NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)				TOTAL CASH REPAYMENTS (PART II) From Schedule F TOTAL LOANS FORGIVEN
DATE PAID (MM/DD/YR)				
	1		1	- 1 .
AMOUNT OF LOAN	₩			
RELATIONSHIP TO CANDIDATE (If Applicable*)				s
NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)				TOTAL (PART I)
		- · · · · · · · · · · · · · · · · · · ·		

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

	dule F)
≂	<u>o</u>
_	(for Sch
Page)

\$ 1,800.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD